## COMBINED DECLARATION AND POWER OF ATTORNEY

Attorney Docket No.

PM 01039 (Vit. 2) 5500\*103

#15

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "Concentrated Water-Dispersible Vitamin Compositions"

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1 9 2001		August 3, 2001	as	
<u>.</u>	<u>ē</u> /	Application Serial No. 09/92	20365 and	
TRAUEMAR	<b>7</b>	was amended on		
		(if	applicable)	
		was amended through		
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amended	by any amendment referred to	o above.	above identified specification, incli	
	ledge the duty to disclose to the Federal Regulations, §1.56.	ne Office all information known to	o me to be material to patentability as	s defined in T
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

(filing date)

(Application No.)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

In the matter of the above-identified application, please recognize the attorneys associated with CUSTOMER NUMBER 23416; all of CONNOLLY BOVE LODGE & HUTZ LLP, as attorneys with full power of substitution to prosecute this application and conduct all business in the Patent and Trademark Office connected therewith.

Send Correspondence To: Connolly Bove Lodge & 1220 Market Street P.O. Box 2207 Wilmington, Delaware 19899-22		Direct Telephone Calls To: (302) 658-9141					
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RESIDENCE	CITIZENSHIP						
POST OFFICE ADDRESS							
FULL NAME OF THIRD JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE		DATE				
RESIDENCE			CITIZENSHIP				
POST OFFICE ADDRESS							
FULL NAME OF FOURTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE		DATE				
RESIDENCE			CITIZENSHIP				
POST OFFICE ADDRESS							
FULL NAME OF FIFTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE		DATE				
RESIDENCE			CITIZENSHIP				
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FULL NAME OF SIXTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE		DATE				
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